McCall Foundation Inc
Torrington, CT

Connecticut Dept of Mental Health and Addiction Services
Provider Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Provider Activity

Monthly Trend	Measure	Actual	1 Yr Ago	Variance %
	Unique Clients	941	913	3%
	Admits	1,028	940	9%
	Discharges	943	975	-3%
	Service Hours	5,235	5,200	1%
	Bed Days	11,527	11,535	0%

▲ > 10% Over 1 Yr Ago ▼ > 10% Under 1Yr Ago

Clients by Level of Care

Program Type	Level of Care Type	#	%
Addiction			
	Outpatient	548	40.4%
	Residential Services	286	21.1%
	Case Management	245	18.0%
	Medication Assisted Treatment	208	15.3%
	Employment Services	67	4.9%
Mental Health			
	Case Management	4	0.3%

Consumer Satisfaction Survey

(Based on 690 FY21 Surveys)

Question Domain	Satisfied % vs Goal%	Satisfied %	Goal %	State Avg
✓ General Satisfaction		96%	80%	92%
✓ Participation in Treatment		96%	80%	92%
✓ Quality and Appropriateness		96%	80%	93%
✓ Overall		95%	80%	91%
✓ Access		93%	80%	88%
✓ Respect		93%	80%	91%
✓ Outcome		91%	80%	83%
✓ Recovery		89%	80%	79%

Satisfied % | Goal % | 0-80% | 80-100% | ✓ Goal Met | Under Goal

Client Demographics

Age	#	%	State Avg
18-25	77	8%	10%
26-34	270	29%	22%
35-44	276	29%	23%
45-54	161	17%	19%
55-64	122	13%	19%
65+	34	4%	8%

Gender	#	%	State Avg
Male	534	57%	59%
Female	407	43%	41%
Transgender			0%

Ethnicity	#	%	State Avg
Non-Hispanic	754	80% ▲	68%
Unknown	108	11%	12%
Hispanic-Other	76	8%	8%
Hispanic-Cuban	1	0%	0%
Hispanic-Mexican	1	0%	1%
Hisp-Puerto Rican	1	0% ▼	11%

Race	#	%	State Avg
White/Caucasian	705	75% ▲	62%
Unknown	92	10%	6%
Other	78	8%	13%
Black/African American	52	6% ▼	17%
Am. Indian/Native Alaskan	9	1%	0%
Asian	3	0%	1%
Hawaiian/Other Pacific Islander	2	0%	0%
Multiple Races			1%

Unique Clients | State Avg ▲ > 10% Over State Avg ▼ > 10% Under State Avg

Variances in data may be indicative of operational adjustments related to the pandemic.

Carnes Weeks
McCall Foundation Inc
Addiction - Residential Services - SA Intensive Res. Rehabilitation 3.7

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	229	232	-1%
Admits	233	243	-4%
Discharges	235	239	-2%
Bed Days	4,787	5,165	-7%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	96%	88%
✓ Valid TEDS Data	97%	95%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	0%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	96%	94%
✓ SA Screen Complete	96%	94%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	100%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		160	68%	80%	69%	-12% ▼
✓ No Re-admit within 30 Days of Discharge		203	86%	85%	88%	1%
Follow-up within 30 Days of Discharge		112	70%	90%	63%	-20% ▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Self Help		176	70%	60%	66%	10%
Abstinence/Reduced Drug Use		114	45%	70%	41%	-25% ▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		20	22 days	0.1	87%	90%	92%	-3%

< 90% | 90-110% | >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 8 Active SA Intensive Res. Rehabilitation 3.7 Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Coach 2.0
McCall Foundation Inc
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	50		
Admits	50	-	
Discharges	26	-	
Service Hours	283	-	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	97%	92%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	100%	49%

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully	14	54%	50%	67%	4%

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Employed	25	50%	20%	27%	30% ▲
✓ Stable Living Situation	47	94%	80%	79%	14% ▲
● Self Help	25	50%	60%	51%	-10%

Service Utilization

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services	27	100%	90%	76%	10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■	100%
Discharges			■	■	■	■	■	■	■	78%
Services				■				■	■	33%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 13 Active Standard Case Management Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Dempsey Center CSSD
McCall Foundation Inc
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	86%
Valid TEDS Data	N/A	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	8%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	95%
SA Screen Complete	N/A	92%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	70%	69%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	91%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	69%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		N/A	N/A	70%	66%	-70%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		15	N/A	N/A	0%	90%	89%	-90%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Dempsey Center DMHAS
McCall Foundation Inc
Addiction - Residential Services - Intermediate/Long Term Res.Tx 3.5

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	86%
Valid TEDS Data	N/A	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	8%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	95%
SA Screen Complete	N/A	92%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	70%	69%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	91%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	69%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		N/A	N/A	70%	66%	-70%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		19	N/A	N/A	0%	90%	89%	-90%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 26 Active Intermediate/Long Term Res.Tx 3.5 Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Dempsey OP
McCall Foundation Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	87%
Valid TEDS Data	N/A	85%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	15%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	92%
SA Screen Complete	N/A	93%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	50%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		N/A	N/A	55%	42%	-55%
Employed		N/A	N/A	50%	33%	-50%
Not Arrested		N/A	N/A	75%	76%	-75%
Self Help		N/A	N/A	60%	15%	-60%
Stable Living Situation		N/A	N/A	95%	75%	-95%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		N/A	N/A	90%	58%	N/A

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 108 Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Glenlunan House
McCall Foundation Inc
Mental Health - Residential Services - MH Intensive Res. Rehabilitation

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	99%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	84%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	92%
SA Screen Complete	N/A	90%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	75%	67%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	81%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	85%	N/A

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		5	N/A	N/A	0%	90%	89%	-90%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 29 Active MH Intensive Res. Rehabilitation Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

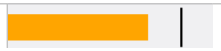
Hotchkiss House CSSD
McCall Foundation Inc
Addiction - Residential Services - Recovery House

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	28	25	12%	▲
Admits	18	15	20%	▲
Discharges	16	15	7%	
Bed Days	3,140	2,592	21%	▲

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Treatment Completed Successfully		11	69%	85%	79%	-16%	▼

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		12	184 days	0.2	95%	90%	65%	5%

< 90% | 90-110% | >110%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■		■		■	■	78%
Discharges		■	■			■	■	■	■	67%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 12 Active Recovery House Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

MAT Naltrexone Main Campus
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	31	24	29%	▲
Admits	18	24	-25%	▼
Discharges	13	11	18%	▲

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	94%	95%
Valid TEDS Data	87%	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	23%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	95%	79%
✓ SA Screen Complete	95%	91%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		9	69%	50%	54%	19%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		31	100%	75%	92%	25%	▲
✓ Employed		16	52%	50%	47%	2%	
✓ Abstinence/Reduced Drug Use		17	55%	55%	65%	0%	
● Stable Living Situation		26	84%	95%	83%	-11%	▼
● Self Help		14	45%	60%	38%	-15%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										67%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 6 Active Naltrexone Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

MAT Neltrexone Renato
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Naltrexone

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	95%
Valid TEDS Data	N/A	93%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	23%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	79%
SA Screen Complete	N/A	91%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	54%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		N/A	N/A	55%	65%	-55%
Employed		N/A	N/A	50%	47%	-50%
Not Arrested		N/A	N/A	75%	92%	-75%
Self Help		N/A	N/A	60%	38%	-60%
Stable Living Situation		N/A	N/A	95%	83%	-95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 6 Active Naltrexone Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

MATx Main Campus
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	141	184	-23%	▼
Admits	69	93	-26%	▼
Discharges	73	99	-26%	▼
Service Hours	1,047	844	24%	▲

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	96%	92%
Valid TEDS Data	78%	90%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	75%	28%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	94%	76%
✓ SA Screen Complete	95%	93%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	100%

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Treatment Completed Successfully	37	51%	50%	44%	1%

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested	146	98%	75%	66%	23%	▲
✓ Abstinence/Reduced Drug Use	90	60%	55%	44%	5%	
● Employed	72	48%	50%	22%	-2%	
● Stable Living Situation	135	91%	95%	63%	-4%	
● Self Help	42	28%	60%	15%	-32%	▼

Service Utilization

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services	72	95%	90%	38%	5%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
Services										100%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 20 Active Buprenorphine Maintenance Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

McCall House
McCall Foundation Inc
Addiction - Residential Services - Transitional/Halfway House 3.1

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	65	59	10%	▲
Admits	53	46	15%	▲
Discharges	52	46	13%	▲
Bed Days	3,600	3,778	-5%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	96%	86%
✓ Valid TEDS Data	90%	87%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	33%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	98%	98%
✓ SA Screen Complete	98%	98%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	100%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully		26	50%	85%	65%	-35%	▼
✓ No Re-admit within 30 Days of Discharge		44	85%	85%	82%	0%	
● Follow-up within 30 Days of Discharge		15	58%	90%	74%	-32%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Abstinence/Reduced Drug Use		51	77%	70%	81%	7%
● Employed		37	56%	60%	36%	-4%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
✓ Avg Utilization Rate		14	88 days	0.2	94%	90%	84%	4%

< 90% 90-110% >110%

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 9 Active Transitional/Halfway House 3.1 Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Migeon Pilots Development
McCall Foundation Inc
Mental Health - Case Management - Supportive Housing – Development

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	4	5	-20%	▼
Admits	-	2	-100%	▼
Discharges	-	2	-100%	▼
Service Hours	5	29	-82%	▼

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Stable Living Situation		3	75%	85%	95%	-10%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services		3	75%	90%	96%	-15%	▼

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	100%	99%

On-Time Periodic	Actual	State Avg
6 Month Updates	50%	87%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%
Services			■							11%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 65 Active Supportive Housing – Development Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Rogers House
McCall Foundation Inc
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	99%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	89%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	86%
SA Screen Complete	N/A	95%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	80%	72%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	88%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	67%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		N/A	N/A	60%	82%	-60%
Stable Living Situation		N/A	N/A	90%	98%	-90%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		6	N/A	N/A	0%	90%	87%	-90%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 24 Active Group Home Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Rogers House CSP
McCall Foundation Inc
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	84%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	84%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	96%
SA Screen Complete	N/A	95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	65%	57%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		N/A	N/A	20%	14%	-20%
Social Support		N/A	N/A	60%	80%	-60%
Stable Living Situation		N/A	N/A	80%	87%	-80%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		N/A	N/A	90%	98%	N/A

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 36 Active CSP Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Senior Outreach
McCall Foundation Inc
Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	16	16	0%	
Admits	8	6	33%	▲
Discharges	8	14	-43%	▼
Service Hours	10	8	27%	▲

Service Engagement

	Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	at least 1 Service within 180 days		6	86%	50%	87%	36%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions		■					■	■	■	44%
Discharges	■				■			■	■	44%
Services	■							■	■	33%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 22 Active Outreach & Engagement Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

SOR E MAT Renato
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	92%
Valid TEDS Data	N/A	90%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	28%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	76%
SA Screen Complete	N/A	93%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	50%	44%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Abstinence/Reduced Drug Use		N/A	N/A	55%	44%	-55%
Employed		N/A	N/A	50%	22%	-50%
Not Arrested		N/A	N/A	75%	66%	-75%
Self Help		N/A	N/A	60%	15%	-60%
Stable Living Situation		N/A	N/A	95%	63%	-95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 20 Active Buprenorphine Maintenance Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

SOR Employment
McCall Foundation Inc
Addiction - Employment Services - Employment Services

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	67	59	14%	▲
Admits	45	49	-8%	
Discharges	56	45	24%	▲
Service Hours	117	112	4%	

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Employed		43	64%	35%	34%	29%	▲

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● Clients Receiving Services		9	82%	90%	91%	-8%

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	85%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	84%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■	100%
Discharges	■	■	■	■	■	■	■	■	■	100%
Services	■		■	■	■		■	■	■	78%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 10 Active Employment Services Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

SOR Mobile MAT
McCall Foundation Inc
Addiction - Medication Assisted Treatment - Buprenorphine Maintenance

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	44	8	450%	▲
Admits	34	8	325%	▲
Discharges	9	5	80%	▲
Service Hours	94	10		

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	87%	92%
Valid TEDS Data	61%	90%

On-Time Periodic	Actual	State Avg
6 Month Updates	0%	28%

Co-occurring	Actual	State Avg
MH Screen Complete	79%	76%
SA Screen Complete	79%	93%

Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	100%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■	100%
Discharges	■	■	■		■		■	■		67%
Services			■		■		■	■	■	56%

■ 1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully	4	44%	50%	44%	-6%

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Not Arrested	43	98%	75%	66%	23%	▲
Employed	17	39%	50%	22%	-11%	▼
Abstinence/Reduced Drug Use	16	36%	55%	44%	-19%	▼
Stable Living Situation	30	68%	95%	63%	-27%	▼
Self Help	7	16%	60%	15%	-44%	▼

Service Utilization

	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
Clients Receiving Services	21	60%	90%	38%	-30%	▼

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | Below Goal

* State Avg based on 20 Active Buprenorphine Maintenance Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Torrington Case Management
McCall Foundation Inc
Addiction - Case Management - Standard Case Management

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	27	34	-21%	▼
Admits	25	32	-22%	▼
Discharges	16	25	-36%	▼
Service Hours	60	63	-5%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	98%	92%

On-Time Periodic	Actual	State Avg
● 6 Month Updates	0%	49%

Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Treatment Completed Successfully	4	25%	50%	67%	-25%	▼

Recovery

National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Employed	16	55%	20%	27%	35%	▲
✓ Stable Living Situation	24	83%	80%	79%	3%	
● Self Help	14	48%	60%	51%	-12%	▼

Service Utilization

	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
● Clients Receiving Services	8	62%	90%	76%	-28%	▼

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■		■	■	■	■	89%
Discharges		■		■	■	■		■	■	67%
Services	■		■	■					■	44%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 13 Active Standard Case Management Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Torrington Main Campus OP
McCall Foundation Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %	
Unique Clients	544	576	-6%	
Admits	392	342	15%	▲
Discharges	362	385	-6%	
Service Hours	3,411	3,548	-4%	

Data Submission Quality

Data Entry	Actual	State Avg
✓ Valid NOMS Data	96%	87%
Valid TEDS Data	82%	85%

On-Time Periodic	Actual	State Avg
✓ 6 Month Updates	64%	15%

Co-occurring	Actual	State Avg
✓ MH Screen Complete	97%	92%
✓ SA Screen Complete	97%	93%

Diagnosis	Actual	State Avg
✓ Valid Axis I Diagnosis	100%	99%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Treatment Completed Successfully		235	65%	50%	50%	15%	▲

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓ Not Arrested		553	94%	75%	76%	19%	▲
● Abstinence/Reduced Drug Use		310	53%	55%	42%	-2%	
● Employed		258	44%	50%	33%	-6%	
● Stable Living Situation		513	87%	95%	75%	-8%	
● Self Help		229	39%	60%	15%	-21%	▼

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
✓ Clients Receiving Services		222	97%	90%	58%	7%

Service Engagement

Outpatient	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
● 2 or more Services within 30 days		239	65%	75%	65%	-10%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										100%
Discharges										100%
Services										100%

1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal | ✓ Goal Met | ● Below Goal

* State Avg based on 108 Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Winsted OP
McCall Foundation Inc
Addiction - Outpatient - Standard Outpatient

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	16	23	-30%
Admits	12	7	71%
Discharges	3	17	-82%
Service Hours	17	38	-55%

Data Submission Quality

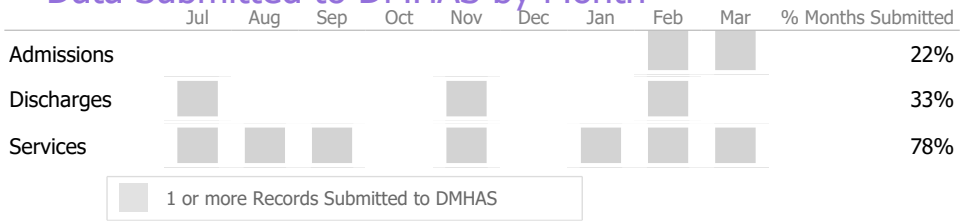
Data Entry	Actual	State Avg
Valid NOMS Data	91%	87%
Valid TEDS Data	56%	85%

On-Time Periodic	Actual	State Avg
6 Month Updates	50%	15%

Co-occurring	Actual	State Avg
MH Screen Complete	100%	92%
SA Screen Complete	100%	93%

Diagnosis	Actual	State Avg
Valid Axis I Diagnosis	100%	99%

Data Submitted to DMHAS by Month



Discharge Outcomes

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully	1	33%	50%	50%	-17%

Recovery

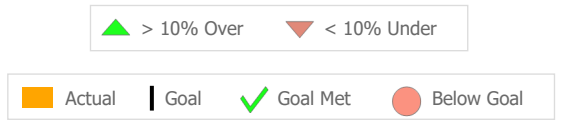
National Recovery Measures (NOMS)	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Not Arrested	15	94%	75%	76%	19%
Abstinence/Reduced Drug Use	8	50%	55%	42%	-5%
Employed	7	44%	50%	33%	-6%
Stable Living Situation	13	81%	95%	75%	-14%
Self Help	1	6%	60%	15%	-54%

Service Utilization

	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services	6	46%	90%	58%	-44%

Service Engagement

Outpatient	Actual	Actual %	Goal %	State Avg	Actual vs Goal
2 or more Services within 30 days	2	17%	75%	65%	-58%



* State Avg based on 108 Active Standard Outpatient Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Women's REACH Program
McCall Foundation Inc
Addiction - Case Management - Outreach & Engagement

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	155	162	-4%
Admits	71	73	-3%
Discharges	74	72	3%
Service Hours	192	549	-65%

Service Engagement

	Homeless Outreach	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal	
✓	at least 1 Service within 180 days		55	77%	50%	87%	27%	▲

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions	■	■	■	■	■	■	■	■	■	100%
Discharges	■		■	■	■	■	■	■	■	89%
Services	■	■	■		■		■	■	■	78%

■ 1 or more Records Submitted to DMHAS

▲ > 10% Over ▼ < 10% Under

Actual | Goal ✓ Goal Met ● Below Goal

* State Avg based on 22 Active Outreach & Engagement Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Wynnewood House
McCall Foundation Inc
Mental Health - Residential Services - Group Home

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	99%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	89%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	86%
SA Screen Complete	N/A	95%

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	80%	72%	N/A
No Re-admit within 30 Days of Discharge		N/A	N/A	85%	88%	N/A
Follow-up within 30 Days of Discharge		N/A	N/A	90%	67%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Social Support		N/A	N/A	60%	82%	-60%
Stable Living Situation		N/A	N/A	90%	98%	-90%

Bed Utilization

	12 Months Trend	Beds	Avg LOS	Turnover	Actual %	Goal %	State Avg	Actual vs Goal
Avg Utilization Rate		6	N/A	N/A	0%	90%	87%	-90%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 24 Active Group Home Programs

Variances in data may be indicative of operational adjustments related to the pandemic.

Wynnewood House CSP
McCall Foundation Inc
Mental Health - Community Support - CSP

Connecticut Dept of Mental Health and Addiction Services
Program Quality Dashboard
Reporting Period: July 2021 - March 2022 (Data as of Jun 27, 2022)

Program Activity

Measure	Actual	1 Yr Ago	Variance %
Unique Clients	0		
Admits	-	-	
Discharges	-	-	
Service Hours	-	-	

Data Submission Quality

Data Entry	Actual	State Avg
Valid NOMS Data	N/A	84%

On-Time Periodic	Actual	State Avg
6 Month Updates	N/A	84%

Co-occurring	Actual	State Avg
MH Screen Complete	N/A	96%
SA Screen Complete	N/A	95%

Data Submitted to DMHAS by Month

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	% Months Submitted
Admissions										0%
Discharges										0%

1 or more Records Submitted to DMHAS

Discharge Outcomes

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Treatment Completed Successfully		N/A	N/A	65%	57%	N/A

Recovery

National Recovery Measures (NOMS)	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Employed		N/A	N/A	20%	14%	-20%
Social Support		N/A	N/A	60%	80%	-60%
Stable Living Situation		N/A	N/A	80%	87%	-80%

Service Utilization

	Actual % vs Goal %	Actual	Actual %	Goal %	State Avg	Actual vs Goal
Clients Receiving Services		N/A	N/A	90%	98%	N/A

> 10% Over < 10% Under

Actual Goal Goal Met Below Goal

* State Avg based on 36 Active CSP Programs

Variances in data may be indicative of operational adjustments related to the pandemic.